

Apsaalooke Nation Higher Education APPLICATION & HANDBOOK

2021-2022

DEADLINE TO SUBMIT APPLICATION ON OR BEFORE
JULY 1ST, 2021 @ 5:00 P.M.

Crow Nation Education Department
P.O. Box 159
Crow Agency, Montana
59022
(406)- 606- 2190

Gary H. Dawes, Higher Education Coordinator gary.dawes@crow-nsn.gov





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INTRODUCATION:

Under the authority of P.L. 93-638 of the Indian Self Determination Act effective May 1992, the Crow Tribe Administration contracted with the Bureau of Indian Affairs, the B.I.E. (Bureau of Indian Education) Model Contract Scholarship. The following goals have been established for the scholarship's programs:

- To insure equal access for all tribal members to higher educational opportunities.
- To ensure the financial assistance that is most beneficial for each individual student.
- To insure fair and uniform services for all students, a committee shall be established for selection of eligible applicants.

SCHOLARSHIP COMMITTEE:

The Crow Tribe Education Scholarship Committee shall be comprised of the Education Director, (BIE) Scholarship Coordinator, Tribal Grant Coordinator, (BIA) Job Placement and Adult Training Coordinator, (BIE) Johnson O'Malley Coordinator, Executive Branch Representative, and a Legislative Branch Representative. The scholarship Committee will meet in August to make selections for the academic year beginning with the fall term of each year. The Scholarship Committee shall make the final selection of qualified, eligible applicants based on the guidelines.

ELIGIBILITY REQUIREMENTS:

Applicants must:

- -Be an enrolled member of the Crow Tribe.
- -Possess a High School diploma and/or HiSET (GED)
- -Be enrolled at an accredited college or university, including on-line classes
- -Be actively pursuing an undergraduate degree
- -Carry a minimum of 12 credits or more
- -Must have a 2.0 GPA on recent OFFICIAL transcript
- -Be Pell eligible to establish financial aid
- -Submit a complete scholarship application with all required documents

PRIORITY CLASSICATION:

The Education Department will make every effort to award scholarships to all eligible students with the grant's funds received from the Bureau of Indian Education. All completed application will be prioritized as follows:

- 1st Priority- Continue students in good academic standing.
- 2nd Priority- New students who are first- time applicants.
- 3rd Priority- Returning students who meet all eligibility requirements (students who have taken sometime- off from school, for any given reason, and are now returning)
- 4th Priority- Students who have incomplete applications will be placed on a waiting list until all requirements are met before consideration for funding.

SCHOLARSHIP AWARD:

Once a student is approved for a scholarship by the Crow Tribal Education Committee, an award amount will be determined. Based on the student's status, the scholarship will be the lessor of the amount as shown below or the student's unmet need as indicated on the financial need's analysis:

Maximum Per Year	Student Status
\$4,500.00	Single or Married with (0) dependents.
\$5,000.00	Married or single with (1) or more dependents (children)

NOTICE OF AWARD:

Upon approval of an award by the Education Committee, a letter will be sent to the student stating the amount of the award, the school year, and the college/ university of choice. A copy of the award letter will also be sent to the Financial Aid Office.

Any students who meet all eligibility and application requirements will be awarded a scholarship. If for any reason an applicant is not approved for an award, a letter will be sent to the student stating the reason.

DISBURSEMENT OF FUNDS:

All scholarship awards for each academic year will be disbursed as follows:

- Freshman and Sophomores student funds will be disbursed twice a semester. First payment will be
 disbursed at the beginning of the semester. Second payment will be disbursed at midterm. To monitor
 students progress, mid- term grades must be submitted before the second payment is disbursed. Funds
 will not be disbursed for those students who are no longer attending classes at mid- term.
- 2. Junior and Senior student funds will be disbursed once at the beginning of each semester.
- 3. For quarterly terms, funds will be disbursed three times a year. To monitor a student's progress, final grades must be submitted at the end of each quarter. Students must meet all requirements for funding to continue.

Funds will be disbursed to Financial Aid Offices to be processed according to their financial policies and procedures.

YEAR LEVEL/ CREDITS:

Student grade level will be determined as follows:

	Semester Credits	<u>Quarter Credits</u>
Year 1/ Freshman	0-30	0-36
Year 2/ Sophomore	31-60	37-84
Year 3/ Junior	61-90	85-132
Year 4/ Senior	91-120	133-180

If an Associates of Arts plan of study exceeds two years, the scholarship committee will review and may continue funding, but not for a second Associates of Arts Degree.

TRANSFER:

If a student is planning on transferring in a given academic year, the student must submit all required documentation from the school that they are planning on transferring to prior to the end of the term. Scholarship amount may change accordingly based upon the unmet need on the financial need's analysis provided by the secondary college.

REPEATING CLASSES:

The Scholarship Committee will not consider a course taken for a third time as part of the minimum twelve credits.

PROBATION:

At the end of a term, a student who does not maintain the minimum 12 credits and a 2.00 GPA will be placed on probation. The student will be notified by letter of the probation status. The student will continue to receive funding in the next term but must maintain the minimum 12 credits and 2.00 GPA.

SUSPENSION:

A student who has failed to maintain the minimum 12 credits and 2.00 GPA for two consecutive terms will be placed on **SUSPENSION** from the Crow Tribal Scholarship. To be considered for further funding, the student must successfully complete a term with a 2.00 GPA or better and a minimum of 12 semester/ quarter credit hours on their own. The student must complete the application process and meet all required deadlines.

WITHDRAW:

- 1. A student in good standing who plans to withdraw from school, or a class must notify the Education Department prior to the end of the term. A written statement indicating the reasons why the student had to withdraw must be submitted. If by withdrawing and failing to earn the minimum 12 credits, the student will be placed on **PROBATION**.
- 2. Any student withdrawing without good cause from college or involuntarily will be placed on SUSPENSION and may be required to reimburse the funds to the Tribal Education Department before consideration can be given for future funding.

STUDENT LOAN:

Crow Tribal Scholarship funds will not pay for previous loans in default.

SUMMER TERM:

Summer term funding is not guaranteed and approved only if funds are available. Only senior level students who need the summer term to graduate will be funded. A letter of request for summer term funding is due before **April** 1^{st} . The following additional documentation is due by **May** 15^{th} .

- Financial Needs Analysis
- Summer term schedule indicating a minimum of 12 credits or the credits needed to graduate.
- Official transcript from the proceeding Spring term.

APPEAL PROCEDURES:

- A student has the right to appeal a decision made by the Scholarship Committee within ten (10) working days of the receipt of the letter rendering a decision.
- The student must appeal in writing and submit any supporting documents to the Committee.
- The Scholarships Committee will address the appeal during a meeting within ten (10) working days of receipt of the appeal.
- The student will be notified of the date and has the right to attend the Committee meeting.
- The student will be notified in writing of the decision made by the Scholarship Committee.
- The decision of the Scholarship Committee is <u>FINAL</u>.

CROW TRIBAL EDUCATION SCHOLARSHIP

APPLCATION AND REQUIRED DOCUMENTS CHECKLIST

FIRST TIME ST	TUDENT:
	A COMPLETE APPLICATION
	PERSONAL LETTER
	CERTIFICATE OF INDIAN BLOOD
	BIRTH CERTIFICATE(S) OF DEPENDENT(S)
	HIGH SCHOOL/ HISET/ GED
	OFFICIAL COLLEGE TRANSCRIPT / OR HIGH SCHOOL TRANSCRIPT
	LETTER OF ACCEPTANCE
	FINANCIAL NEEDS ANALYSIS
	FALL REGISTRATION/ CLASS SCHEDULE
CONTINUING	STUDENTS:
	AN UPDATED APPLICATON
	MOST RECENT COLLEGE TRANSCRIPT
	FINANCIAL NEEDS ANALYSIS
П	FALL REGISTRATION/ CLASS SCHEDULE

CROW TRIBE HIGHER EDUCATION SCHOLARSHIP

I. STUDENT INFORMATION:

Last Name:	First Name:		Mi	ddle Name:	Maiden Name:
Permanent Address:	City:	State:	Zip	:	Phone Number:
Address for SY if Different from	Above: Cit	ty:	State:	Zip:	Message Phone:
Social Security Number	Date of Birt	ch	Email Addre	ess	
Contact Person:			_ Phone Num	ber:	
Gender: Male () Female () Ve	teran: Yes N	No State o	f Residency:	Crow E	nrolled: Yes () No ()
II. FAMILY INFORM Material Status: Single Ma Dependents Living with Applican Names:	nrried Div	vorcedS	Separated		Date of Birth:
III. HIGH SCHOOL		Voor G	raduated or D	ate HiSet/GED Re	prejved
High School Attended				ate Hiset/GLD Ne	eceiveu
School Address IV. COLLEGE INFOR	RMATION:	City, St	ate, Zip		
College or University Attending		School	Telephone Nu	umber	
School Address		— City, St	ate, Zip		
College Major		Year in	College (Fres	hman, Sophomor	e, Junior, Senior)
Entry Date		Enrolln	nent Status (F	ull Time/ Part Tim	ne)
Expected Degree (AA, AAS, BA,	BS)	Expect	ed Graduation	n Date	
Have you received any funding	from the Crow	Tribe Educatio	on Departmer	nt in the past? YES	SNO
If yes, which scholarship and wh	nen? Higher Ed.	Tribal	GrantsJ	OB Replacement	& Training
Contact Person- College/ Univer	rsity Attending	 Teleph	one Number	& Email	

FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT (FERPA)

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232 g; CFR Part 99) is a Federal law that protects the privacy of student education records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education. FERPA gives parents certain rights with respect to their children's education records. These rights transfer to the student when he/ she reaches the age of 18 or attends a school beyond high school level.					
I,(student) read the FERPA Law and will abide by this law. I will communicate directly with the Crow Tribal Education Department.					
ignature: Date:					
RELEASE OF INFORMATION					
 The authority for solicitation of the information on this form is 25 U.S.C. 13(42 Stat. 208) and P.L. 84- 959 (70 stat. 986) as amended by L.L. 88-230(77 Stat. 471, 15 U.S.C. 309). Disclosure of the requested information by the applicant is voluntary but required to receive benefits. The purpose of this information collection is to determine your eligibility for services. The routine use of this information is for the Crow Tribal Education Program to evaluate your application; parts or all the information in your application will be used for financial and budgeting purposes. 					
I have read the above statement and I hereby provide the required information and authorize the use of such information to the extent of the uses specified in the statement.					
ignature: Date:					
DISCLOSURE OF PERSONAL INFORMATION:					
Disclosure by you of your social security number, transcripts or school grades, medical records, and income verification, veteran's status, legal records, debt, disability evaluation and other information which may have a bearing on your application. The authority for collection of this information is: CFR 25, 34.2 U.S.C. 13 and 309 831 AM 4. The sole purpose of this information is to determine eligibility services.					
I AUTHORIZE THE CROW TRIBAL EDUCATION DEPARTMENT THE USE OF INFORMATION LISTED ABOVE.					
ignature:Date:					

AUTHORIZATION AND AGREEMENT:			
Please sign each section for each seme	ester/ quarter of	attendance.	
Name of College/ University	City	State	Zip Code
I hereby agree to attend the college/u 12 semester credit hours each term. I that funds issued for educational purp Scholarship. I understand that the PEL financial aid package, and I agree to us grades, mid- term progress reports, at Department.	will satisfactorily oses will be so u L and other fund se funds for purp	y complete the course v used or repayment will k ding available to me will poses intended. I autho	which I have selected. I further agree be made to the Crow Tribal Education be included when computing my rize the college/ university to release
Signature:		Date:	
Patricipal and American Company of the Company of t			
AUTHORIZATION AND AGREEMENT:			
Please sign each section for each seme	ester/ quarter of	attendance.	
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Signature:		Date:	

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Signature:		Date:	

Please keep a copy of the complete application for your files and submit the original to:

Crow Tribal Education Department P.O. Box 159 Crow Agency, Mt. 59022

Telephone: (406)- 606- 2190

MUST BE POST MARKED ON OR BEFORE JULY 1ST, 2021 BY 5:00 P.M.

FINANCIAL NEEDS ANALYSIS FORM

	TO BE COMPLETE STUDENT.	D AND TURNED INTO THE COLLE	GE/ UNIVERSITY FINA	NCIAL AID OFFICE BY THE
Name:	NAMES OF THE PERSON OF THE PER	Soc. Sec. No.:		
Home Address	s:			
Stroot or P O	Roy			
street or P.O.	BOX	City/Town	State	Zip
Year in College	e	N	lajor	
Number of De	pendents:	This student is considered: I	ndependent Dep	endent
11. 7	ГО ВЕ СОМРЬЕТЕ	D BY THE FINANCIAL AID OFFICE:		
requested from Please comple Mt. 59022 or y	m your office bef ete this form and you may give it to	e Crow Tribal Higher Education So ore we can take action on the stu mail the original to: Crow Tribe E o the student in a sealed envelop- it must be delivered sealed.	idents application. W ducation Department	e appreciate your assistance. t P.O. Box 159, Crow Agency,
BUDGET PERIO	OD: From	To	, Which w	ill Start
t territoria de la compansión de la E tablica de C ENTA de la compansión de la compa	\$nucation Assistance	Parent Contribution Student Contribution Veteran's Benefits AFDC/Welfare Social Security State (Indian) Voc. Rehab.	FED. FED. FED. FED. FED. OnFED. Othe	PUS BASED/OTHER AID PELL SEOG Perkins CWS larship r
TOTAL EXPENS	SES: \$	T	OTAL RESOURCES: \$_	
Student Unme	et Need or Recom	nmendation Amount: \$ (EXPENSES	MINUS RESOURCES)	
FINANCIAL A	ID OFFICER	DATE		TELEPHONE NUMBER
NAME OF IN	CTITLIF			